

CLAIMS		AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
		Indep	Depend	Indep	Depend	Indep	Depend
1							
2							
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49							
50							
Total Indep		3		1			
Total Depend		43		23			
Total Claims		46		24			

* May be used for additional claims or amendments

		*		*		*	
		Indep	Depend	Indep	Depend	Indep	Depend
51							
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CLAIMS ONLY							Application Number 09/830,954		Filing Date				
							Applicant(s)						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments						
	Indep	Depend	Indep	Depend	Indep	Depend	*		*		*		
101							51						
102							52						
103							53						
104							54						
105							55						
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146							96						
147							97						
148							98						
149							99						
150							100						
Total Indep							Total Indep						
Total Depend							Total Depend						
Total Claims							Total Claims						